Docket No. K-2051

## MBINED DECLARATION AND POWER OF ATTORNEY

TRADENIE (ORIGINAL, DESIGN, NATIONAL STAGE OF PCT OR CIP APPLICATION)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: NON-ROTATABLE PROTECTIVE MEMBER, CUTTING TOOL USING THE PROTECTIVE MEMBER, AND CUTTING TOOL ASSEMBLY USING THE PROTECTIVE MEMBER

the specification of which: (complete (a), (b) or (c) for type of application)

## REGULAR OR DESIGN APPLICATION

			REGU	LAR OR DESIGN APP	LICATION	
(a) (b)	[ ] [X]		ned hereto. d on <u>February 6, 200</u> —-	04 as Application Seria	al No. <u>10/773,690</u> and	l was amended on
			PCT FILED APP	LICATION ENTERING	NATIONAL STAGE	·
(c)	[]		scribed and claimed i	n International Applica	tion No filed	on and as
		ACK	NOWLEDGMENT C	F REVIEW OF PAPE	RS AND DUTY OF CA	ANDOR
				nderstand the contents amendment referred t		d specification,
				nation which is materia al Regulations. §1.56(a		this application in
[	X ]In	compliand	e with this duty there	e is attached an inform	ation disclosure staten	nent. 37 CFR 1.97.
				PRIORITY CLAIM	ı	
for p	atent	or invento	r's certificate listed b	der Title 35, United Sta elow and have also ide ing date before that of	entified below any forei	ign application for
			·	(complete (d) or (e)	))	
(d)	[X]	no such	applications have be	een filed.		
(e)	[ ]	such ap	plications have been	filed as follows:		
		EAR		PLICATION(S), IF AN' R DESIGN) PRIOR TO		ONTHS
_	Cou	untry	Application No.	Date of Filing (day, month, year)	Date of Issue (day, month, year)	Priority Claimed
		ALL	FOREIGN APPLICA (6 MONTHS FOR	TION(S), IF ANY FILE R DESIGN) PRIOR TO	SAID APPLICATION	ONTHS
Country		untry	Application No.	Date of Filing (day, month, year)	Date of Issue (day, month, year)	Priority Claimed
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## **CONTINUATION-IN-PART**

(complete this part only if this is a continuation-in-part application)

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Registrations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing Date)	(Status)	(patented, pending, abandoned)	
(Application Serial No.)	(Filing Date)	(Status)	(patented, pending, abandoned)	
	POWER	OF ATTORNEY		
As a named inventor, I here and transact all business in (List name and registration I	the Patent and Trader	ng attorney(s) and/omark Office connec	or agent(s) to prosecute this application ted therewith.	
John J. Priz			n No. 29,970	
Larry R. Me		Registration No. 33,423		
Kevin P. We	eidon Bucchianeri	Registration No. 47,307 Registration No. 54,928		
Stanislav A		Registration No. 34,979		
James G. P		Registration No. 33,757		
Stephen T.		Registration No. 28,688		
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SEND CORRESPO	NDENCE TO:	DIRECT TELE	PHONE CALLS TO:	
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I baraby dealars that all stat	omante mada barain e	of my own knowlod	an are true and that all statements	
made on information and be the knowledge that willful fal	lief are believed to be lse statements and the Title 18 of the United	true; and further the e like so made are States Code and t	ge are true and that all statements nat these statements were made with punishable by fine or imprisonment, or hat such willful false statements may n.	
Full name of sole or first inv	entor <u>Daniel J. Mo</u>	utbaan		
Inventor's signature	ulf Mout			
Date <u>6/23/04.</u>	Country	of Citizenship	U.S.A.	
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Inventor's signature				
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Residence			Control of the Contro	
Post Office Address		<del>y </del>		
Full name of second joint in	ventor, if any			
Inventor's signature			·	
Residence				

Post Office Address \_\_